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<b>TRANSMITTAL FORM</b> <i>(to be used for all correspondence after initial filing)</i>	Application Number	10/081,318	
	Notice of Allowance Filing Date	dated: 04/29/2004 2/21/02	
	First Named Inventor	Hans Jaeger	
	Art Unit	3653	
	Examiner Name	Schlak, Daniel K.	
Total Number of Pages in This Submission	16	Attorney Docket Number	770P01085-US (PAR)

ENCLOSURES (check all that apply)		
<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance communication to Group
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Amendment / Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Terminal Disclaimer	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Request for Refund	<b>New Declarations and Power of Attorney for Patent Application</b>
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Certified Copy of Priority Document(s)	Remarks	
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application		
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Joseph V. Gamberdell, Jr. Reg. # 44,695 Perman & Green, LLP
Signature	
Date	8 June 2004

CERTIFICATE OF TRANSMISSION/MAILING			
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:			
Typed or printed name	Margaret Miron		
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Docket No.  
770P010685-US (PAR)

# Declaration and Power of Attorney For Patent Application

## English Language Declaration

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name,

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled

### SEPARATOR

the specification of which

(check one)

☐ is attached hereto.

☒ was filed on 2/21/02 as United States Application No. or PCT International

Application Number 10/081,318

and was amended on 2/4/04

(if applicable)

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, or plant breeder's rights certificate(s), or 365(a) of any PCT International application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application(s)

Priority Not Claimed

(Number)

(Country)

(Day/Month/Year Filed)

☐

(Number)

(Country)

(Day/Month/Year Filed)

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I hereby claim the benefit under 35 U.S.C. Section 119(e) of any United States provisional

<u>60/277,841</u>	<u>3/22/01</u>
(Application Serial No.)	(Filing Date)
<u>60/277,873</u>	<u>3/22/01</u>
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(Application Serial No.)	(Filing Date)

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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

**POWER OF ATTORNEY:** As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith. *(list name and registration number)*

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Joseph V. Gamberdell, Jr. (203) 259-1800

Full name of sole or first inventor <b>Hans Jaeger</b>	
Sole or first inventor's signature	Date
Residence <b>Thunstetten, Switzerland</b>	
Citizenship <b>Switzerland</b>	
Post Office Address <b>Eschenstrasse 11, 4922 Thunstetten, Switzerland</b>	

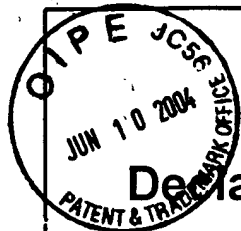
Full name of second inventor, if any <b>Stefan Etter</b>	
Second inventor's signature <i>S. Etter</i>	Date <i>14.5.2004</i>
Residence <b>Kehrsatz, Switzerland</b>	
Citizenship <b>Switzerland</b>	
Post Office Address <b>Kirchweg 8, 3122 Kehrsatz, Switzerland</b>	

Full name of third inventor, if any <b>Thomas Gasser</b>	
Third inventor's signature	Date
Residence <b>Bern, Switzerland</b>	
Citizenship <b>Switzerland</b>	
Post Office Address <b>Mittelstrasse 61, 3012 Bern, Switzerland</b>	

Full name of fourth inventor, if any	
Fourth inventor's signature	Date
Residence	
Citizenship	
Post Office Address	

Full name of fifth inventor, if any	
Fifth inventor's signature	Date
Residence	
Citizenship	
Post Office Address	

Full name of sixth inventor, if any	
Sixth inventor's signature	Date
Residence	
Citizenship	
Post Office Address	



Docket No.  
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**Joseph V. Gamberdell, Jr. (203) 259-1800**

Full name of sole or first inventor <b>Hans Jaeger</b>	Date
Sole or first inventor's signature	
Residence <b>Thunstetten, Switzerland</b>	
Citizenship <b>Switzerland</b>	
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Second inventor's signature	
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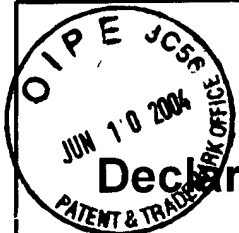


Full name of third inventor, if any <b>Thomas Gasser</b>	<b>06/01/04</b> Date
Third inventor's signature 	
Residence <b>Bern, Switzerland</b>	
Citizenship <b>Switzerland</b>	
Post Office Address <b>Mittelstrasse 61, 3012 Bern, Switzerland</b>	

Full name of fourth inventor, if any	
Fourth inventor's signature	Date
Residence	
Citizenship	
Post Office Address	

Full name of fifth inventor, if any	
Fifth inventor's signature	Date
Residence	
Citizenship	
Post Office Address	

Full name of sixth inventor, if any	
Sixth inventor's signature	Date
Residence	
Citizenship	
Post Office Address	



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Joseph V. Gamberdell, Jr. (203) 259-1800

Full name of sole or first inventor	<b>Hans Jaeger</b>	
Sole or first inventor's signature	<i>Hans Jaeger</i>	Date <i>May 10, 2004</i>
Residence	<b>Thunstetten, Switzerland</b>	
Citizenship	<b>Switzerland</b>	
Post Office Address	<b>Eschenstrasse 11, 4922 Thunstetten, Switzerland</b>	

Full name of second inventor, if any	<b>Stefan Etter</b>	
Second inventor's signature		Date
Residence	<b>Kehrsatz, Switzerland</b>	
Citizenship	<b>Switzerland</b>	
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Third inventor's signature	Date
Residence <b>Bern, Switzerland</b>	
Citizenship <b>Switzerland</b>	
Post Office Address <b>Mittelstrasse 61, 3012 Bern, Switzerland</b>	

Full name of fourth inventor, if any	
Fourth inventor's signature	Date
Residence	
Citizenship	
Post Office Address	

Full name of fifth inventor, if any	
Fifth inventor's signature	Date
Residence	
Citizenship	
Post Office Address	

Full name of sixth inventor, if any	
Sixth inventor's signature	Date
Residence	
Citizenship	
Post Office Address	